



# SUMMER ARCHAEOLOGY CAMP 2012

Enrollment is limited. Please return this form as soon as possible with your fee to 18 Broadhead Avenue, New Paltz, NY 12561. If you have any questions or need more information contact Rebecca Mackey at 255-1660 x 105 or rebecca@huguenotstreet.org

Child's Name \_\_\_\_\_ Date of Birth \_\_\_\_\_

Child's Nickname \_\_\_\_\_ Grade completed \_\_\_\_\_

Parent's Name \_\_\_\_\_ Phone (home) \_\_\_\_\_

Address \_\_\_\_\_ Phone (work) \_\_\_\_\_

Email \_\_\_\_\_ Alternate contact \_\_\_\_\_

Does your child have any allergies or medical conditions we should be aware of? Yes/No

If yes, please explain \_\_\_\_\_

Please note: we will send detailed medical forms prior to camp.

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Please check the appropriate program (s)

## ARCHAEOLOGY FIELD SCHOOL for High School Students (AGES 13-18)

Monday-Friday, July 23 -July 27

\$300/\$275 Friends of Huguenot Street

## WHAT LIES BENEATH: ARCHAEOLOGY CAMP for Elementary School (Ages 8 to 12)

Monday-Friday, July 30 -August 3

\$300/\$275 Friends of Huguenot Street

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 Charge my VISA or MasterCard

Credit card number \_\_\_\_\_ CVC \_\_\_\_\_ EXP \_\_\_\_\_

Enclosed is my check payable to Historic Huguenot Street

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As a parent/guardian of the above listed child, I recognize and acknowledge that there are certain risks of physical injury during the program. I agree to assume the full risks of any injuries, damages, or loss that my child may sustain as a result of such participation. I agree to waive and relinquish all claims and hold harmless Historic Huguenot Street from any and all claims. Photographs of camp activities, which included my child, may be used in promotional materials for Historic Huguenot Street.

Signature \_\_\_\_\_ Date \_\_\_\_\_